

TOWN OF DAVIE
6591 S.W. 45 STREET
DAVIE, FLORIDA 33314
(954)797-1112

HOME OCCUPATIONAL LICENSE APPLICATION

INSTRUCTIONS: For each Business Location in the Town of Davie, please complete an application. Once completed, return the application to the Occupational License division located at Town Hall.

APPLICANTS: COMPLETE BOTH SIDES OF APPLICATION

BUSINESS NAME: Valerie L. Moran Communications, Inc.
BUSINESS STREET ADDRESS: 3201 SW 135th Terrace, Davie FL ZIP 33330
BUSINESS MAILING ADDRESS: same as above ZIP _____
BUSINESS PHONE: 954-801-7700
DESCRIBE TYPE OF BUSINESS: Public Relations (press releases for media)
BUSINESS IS: Corporation _____ Sole Proprietor X Partnership _____

Owner/Officer (s)	Home Address	City/Zip	Phone#
1. <u>Valerie L. Moran</u>	<u>3201 SW 135th Terrace, Davie FL</u>	<u>33330</u>	<u>954-424-0048</u>
2. _____	_____	_____	_____

Federal ID Number or Social Security Number _____

I understand that this is an application for a home occupational license in the Town of Davie and I may not conduct any business at this location until I have received the license itself. I further understand that this license upon issuance, is valid until September 30, 2003 and must be renewed before October 1st.

This application for home occupational license allows mail and telephone use only, no signs or exterior storage, no on-site employees are permitted.

Valerie L. Moran President

Print Owner or Officers Name and Title

[Signature]

Signature of Owner or Officer

Office Use Only: Date <u>1/31/03</u> Category <u>13500</u> Fee Exempt per Sec. 13-13 _____		Fee <u>115.76</u> Rec# _____		New <input checked="" type="checkbox"/> Trans _____	
License # <u>03-18083</u> Control # <u>14792</u>		Zoning <u>R-1</u>			
Council approval Required <input checked="" type="checkbox"/> Yes _____ No _____		Zoning Approval <u>Jat</u>		Date <u>2/10/03</u>	
Town Council Date _____		Approved _____		Denied _____	
Tabled To _____		Approved _____		Denied _____	
OCCUPATIONAL LICENSE DEPARTMENT APPROVAL _____					

8/00

OWNER SIGNATURE REQUIRED ON BACK OF APPLICATION

Phone & Mail only